OFFICE OF THE MEDICAL EXAMINER
COUNTY OF COOK, ILLINOIS

REPORT OF POSTMORTEM EXAMINATION

Nancy J. Jones, M.D.
THIS CERTIFIED COPY VALID
WHEN MULTICOLOR SIGNATURE
SEAL IS AFFIXED

NAME MARTIN MYERS CASE NO. 450 of April, 1989 mm 7/22/12
INITIAL DATE

AGE 30 RACE White SEX Male DATE OF DEATH April 22, 1989

ADDRESS OF DECEDENT 14251 Central Ave. DATE EXAMINED April 22, 1989

CITY & STATE Midlothian, IL EXAMINED BY Tae Lyong An, M.D.

Length 72 inches. Weight 223 pounds. Hair brown. Irides blue. Sclerae white. Pupils dilated.

EXTERNAL EXAMINATION:

The body is received clothed in dark blue jacket, light blue T-shirt, blue jean pants, white jockey shorts, white socks, and white gym shoes. The upper clothing show apparent bullet defect. These clothes were sent to the crime laboratory, as described below.

The body is that of a moderately obese, rather young-looking, white male.

EXTERNAL INJURIES:

Seven bullet wounds are observed, composed of four entries and three exits.

Number one bullet wound of entry is located on the lower eyelid of the right eye in the medial portion, is semi-circular depression from the margin of the lower eyelid, measuring 8 mm in longest diameter at the margin of the lower eyelid. One transverse abrasion is seen just below this number one bullet wound, in the right anterior face, at about 1 cm below the number one bullet wound level, measuring 1x1/2 cm. This area is more protruding than the level of the lower eyelid of the right eye. This abrasion is considered to have been made by the number one wound bullet. Several pinkish possible stipplings are seen in the upper eyelid of the right eye in the medial portion, the largest measuring about 1x1 mm. The underlying right eyeball shows extensive perforation in the medial portion. The cornea appears to be intact without laceration.

Number two bullet wound of entry is located on the right anterior chin, at 3 cm from the right mouth angle, toward eight o'clock, measuring 7 mm in diameter with marginal abrasion in the entire circumference, measuring from 2 mm to 8 mm in width, widest in the lateral aspect. No apparent soot deposit or stippling observed around this wound.

Number three bullet wound of exit is located on the right parietal-occipital area at 14 cm from the right tragus toward 11 o'clock, measuring 3x2 cm. It is lacerated in stellated shape. No apparent soot deposit or stippling observed around this wound.

Number four bullet wound of exit is located on the left occipital area in the midupper portion, at 12 cm from the left tragus toward two o'clock, measuring 3x2 cm, lacerated in stellated shape. No apparent soot deposit or stippling observed around this wound.

Number five bullet wound of entry is located on the left lower back, at the base of upper two-third, at 5 cm left of the vertebral midline, measuring 8 mm in diameter with pale marginal abrasion, measuring 2 or 5 mm in width, widest in the lateral aspect. No apparent soot deposit or stippling observed around this wound.

Number six bullet wound of exit is located on the right upper abdomen, at 11 cm right of the abdominal midline, 10 cm above the transverse umbilical line, transversely elongated, measuring 17x10 mm with a little marginal abrasion. No apparent soot deposit or stippling observed around this wound.

Number seven bullet wound of entry is located on the right lower abdomen, at 10 cm right of the abdominal midline at 4 cm below the transverse umbilical line, measuring 11 mm in diameter, with narrow margin abrasion in the circumference, measuring less than 1 mm in width. No soot deposit or stippling observed around this wound.

One bruise is seen on the back at the upper vertebral midline, at the base of upper two-third, measuring about 4x4 cm. This is the area where a bullet is recovered, as described below. There is mild swelling in this area.

No evidence of other trauma or foul play observed. No apparent chronic needle tracks observed. The body rigidity is marked. Body lividity is also marked, mainly on the back side of the body.

The scalp shows no apparent other injury. No conjunctival hemorrhage observed. The right eyeball shows extensive laceration and complete collapse, due to bullet laceration. The nasal bone appears to be intact on palpation. No evidence of trauma is seen inside the mouth. Upper jaw reveals no natural teeth and a full denture in place. Lower jaw reveals most natural teeth. There is a short moustache and beard. The skin around the neck is intact and clean. Chest is symmetrical. Abdomen is somewhat protuberant. External genitalia are those of a normal adult male, circumcised. The entire back shows no other injury or deformity. Upper and lower extremities are unremarkable.

INTERNAL EXAMINATION:

The body is opened by the usual Y-shaped incision. All organs are present in the usual anatomic position. The pleural cavities and the pericardial sac are free of fluid or blood. The abdominal cavity contains about 1500 cc of partially clotted blood. There are a few lacerations in the mesentery with irregular hemorrhagic infiltration in these areas.

INTERNAL INJURIES:

Number one bullet wound tract is seen to be directed backward and upward. The bullet perforated the right eyeball, in the medial portion, and then entered the cranial cavity through the right anterior cranial fossa, extensively lacerated the right frontal lobe, inferior aspect, also inferior aspect of the right temporal lobe, anterior portion, and then lacerated the right occipital lobe and then exited numeber three bullet wound.

Number two bullet wound tract is seen to be directed backward, leftward, and upward. The bullet lacerated the wall of the right cheek, without entering the oral cavity, and then penetrated the right maxilla in the lower portion, and then entered the cranial cavity through the foramen magnum, in the right anterolateral aspect, and then extensively lacerated the medulla, and then left cerebellar hemisphere, and then lacerated the left occipital lobe near the pole area and then exited number four bullet wound.

Number five bullet wound tract is seen to be directed forward, rightward, and upward. The bullet fractured the lumbar vertebra at L2 level and then lacerated the mesentery, and then exited number six bullet wound.

Number seven bullet wound tract is seen to be directed backward, leftward, and upward. The bullet lacerated the mesentery, at a few sites, and then lacerated the right kidney in the posterior lower portion, and then fractured vertebra at L2 level in the right lateral aspect, and then deposited under the skin at the vertebral midline, at the base of upper two-third, with bruises located as described above. It is a large, copper jacketed bullet with round head and round base. The base of this bullet is marked as "A".

ORGAN SYSTEMS REVIEW:

CENTRAL NERVOUS SYSTEM: The scalp undersurface shows extensive hemorrhagic infiltration in both the left and right occipital area, upper portion measuring about 12x7 cm. The rest of the scalp is rather clean. The temporal muscles are free of hemorrhage. The skull reveals extensive, multiple fractures; there is a comminuted fracture in the right anterior cranial fossa, one linear fracture is extending to the left anterior

ORGAN SYSTEMS REVIEW: Cont

cranial fossa, one linear fracture is extending from the right anterior cranial fossa to the left middle cranial fossa, another fracture line is extending from the right anterior cranial fossa to the right middle cranial fossa. There is extensive comminuted fracture, involving both left and right occipital bone upper portion, measuring about 10x7 cm. There is one vertical linear fracture, extending down between the left and right occipital bone to the foramen magnum. The skull reveals no other fracture. The brain weighs 1390 grams, and shows extensive subarachnoid hemorrhage, irregularly involving most of the brain surface, and there is extensive destruction along the bullet tract, described above. The cerebral arteries are unremarkable. The left uncal groove is of usual appearance. The right uncal groove is extensively lacerated by the bullet. Multiple coronal sections of the entire brain fails to reveal any other significant abnormality.

NECK ORGANS: There is no hemorrhage in the muscle tissue around the larynx or in the subcutaneous tissue on the anterior aspect of the neck. The hyoid bone and the laryngeal cartilage show no fracture. The epiglottis and the glottis are of usual appearance. The vocal cords show no hemorrhage on multiple sectioning. The entire tongue reveals no evidence of injury. No evidence of trauma is seen on the anterior surface of the cervical vertebrae.

RESPIRATORY SYSTEM: The lungs weigh 780 grams, are moderately congested, without any apparent parenchymal lesion. The tracheobronchial tree is patent without foreign material. The pulmonary arterial tree is patent without embolus.

CARDIOVASCULAR SYSTEM: The heart weighs 395 grams. The coronary arteries show severe atherosclerotic changes; the right coronary artery shows about 50 percent occlusion. The anterior descending branches show about 75 percent occlusion. The circumflex branch shows about 50 percent occlusion. The cardiac valves show no deformity. The myocardium is normal, without any infarct. No congenital cardiac anomaly observed. The aorta shows no apparent injury and shows smooth inner surface.

HEPATOBILIARY SYSTEM: The liver weighs 2790 grams, and shows prominent yellow coloration, indicating fatty liver. The gallblader contains about 10 cc of bile.

RETICULOENDOTHELIAL SYSTEM: The spleen weighs 220 grams, is of usual appearance. The lymph nodes are unremarkable.

ENDOCRINE SYSTEM: The pituitary, thyroid, adrenal glands, and the pancreas are of usual appearance.

ORGAN SYSTEM REVIEW: Cont

GENITOURINARY SYSTEM: The kidneys weigh 400 grams. The cortex and the medulla are otherwise well preserved. The renal pelves, ureters, and the urinary bladder are of usual appearance.

GASTROINTESTINAL SYSTEM: The esophagus is lined by smooth mucosa. The stomach contains about 200 cc of brownish pasty material with many whitish fragments. The small and the large intestines show no apparent injury and contains yellowish-brownish fecal material. The appendix is present.

Multiple pictures are taken as evidence.

Multiple x-rays are taken which show one bullet that was recovered.

Blood, bile, and urine are saved for toxicological analysis.

Crime laboratory specimen consists of blood, one bullet, and clothes, and head hair, as requested by the crime laboratory police officer of Cook County Sheriff's Police Department.

ANATOMIC DIAGNOSES:

1. Gunshot wounds of the face, lacerating brain.

2. Gunshot wounds of the abdomen, lacerating mesentery and kidney.

3. Gunshot wound of the back, lacerating mesentery.

4. Coronary atherosclerosis, marked.

OPINION:

The subject was reportedly found lying unresponsive in the Cook County Forest Preserve, near cemetery. Death is considered to be related to multiple gunshot wounds.

Tae Lyong An, M.D.
Deputy Medical Examiner

TLA/Blk
5/24/89

OFFICE OF THE MEDICAL EXAMINER
COUNTY OF COOK, ILLINOIS

RESULTS OF TOXICOLOGIC ANALYSES

M.E. CASE NO. 0450 APR 89 TOX. CASE NO. 891627

DECEASED NAME : MARTIN H MYERS

RACE : WHITE SEX : MALE AGE : 43

AUTOPSY DATE 04/22/89 REPORT DATE 05/02/89

PATHOLOGIST : TAE LYONG AN M.D.

DRUG/TISSUE	RESULTS	AMOUNT	
BENZOYLECGONINE			
BLOOD	NEGATIVE		
ETHANOL			
BLOOD	POSITIVE	211	MG/DL
ETHANOL			
URINE	POSITIVE	271	MG/DL
ETHANOL			
BILE	POSITIVE	218	MG/DL
OPIATES			
BLOOD	NEGATIVE		

MICHAEL I. SCHAFFER, PH.D.
TOXICOLOGIST

FORENSIC INSTITUTE

MEDICAL EXAMINER CASE REPORT COOK COUNTY

450 APR '89

CASE NO.

DECEASED Tent.	AGE	SEX	RACE	ADDRESS	PHONE
Martin Myers	30's	M	W	14251 Central Ave. Midlothian Ill.	388-6508

CLASSIFICATION

NATURAL ____ VIOLENT ____ D.O.B. - Unknown

TYPE OF INVESTIGATION

SCENE ✓ TELEPHONE ____ F.H. ____ HOSP. ____

ADDRESS OF OCCURENCE

5900 W. Midlothian Turnpike Crestwood, Ill.

TYPE OF PREMISES WHERE FOUND

Forest Preserve (near cemetary)

TIME/DATE FOUND

2240hrs 4/21/89

POLICE AGENCY R.D. #

04-89-1779

PERSON DISCOVERING DECEASED	RELATIONSHIP	ADDRESS	PHONE
Crestwood P.D.			
PERSON INTERVIEWED			
Det. Trammell #410	R/O	Cook County Forest Preserve P.D.	771-1000

PRONOUNCEMENT:	PHYSICIAN:	HOSPITAL:
DATE: 4/22/89 TIME: 0030	Investigator Thompson	Scene

POLICE NOTIFIED	INSTITUTE NOTIFIED	ARRIVAL:	CLOSED:
DATE:	DATE: 4/21/89	DATE:	4/22/89
TIME:	TIME: 2310	TIME:	0300

NARRATIVE: DESCRIBE CIRCUMSTANCES SURROUNDING DEATH-PHYSICAL EVIDENCE, ETC.

Scene Investigation: Multiple gunshot victim

R/I assigned this case on 4/22/89. The following information was obtained from Det. Trammell #410 of the Cook County Forest Preserve P.D. Subject was found face up near the entrance of the Bachelor Woods Cemetary which is located 5900 W. Midlothian Turnpike Crestwood, Ill. at approximately 2240hrs on 4/22/89. Subject was fully clothed and appeared to have sustained multiple gunshot wounds. R/I pronounced Subject at the Scene at 0030hrs on 4/22/89. Det. Trammell #410, stated that a nearby resident heard Several gunshots and called police. Police

REPORTING INVESTIGATOR

SUPERVISOR SIGNATURE

F-647

REPORT CONTINUATION SHEET

OFFICE OF THE MEDICAL EXAMINER
INVESTIGATION SECTION

PAGE 2 M.E. CASE # 450 Apr. 89 DECEASED: Tent. Martin Myers

recovered one expended Shell Casing near Subjects body but they have no Motive, Weapon or Suspect at this time. Subject was tentatively identified as Martin Myers From miscellaneous papers found in his pockets. Subject has been ordered to the Institute for further examination.

H. Thompson #55
REPORTING INVESTIGATOR

Howard Thompson #55
SUPERVISOR SIGNATURE

ORIGINAL

239006

OFFICE OF THE MEDICAL EXAMINER
COUNTY OF COOK, ILLINOIS

FEE RECEIPT

Date 7/27 20 12

Case Number 450-APR-89 Name of Deceased Martin Myers

Received From Peter Crapier Address Palos Hills

	PHOTOGRAPHY		
	MICROSCOPIC SLIDES		
✓	PROTOCOLS Ctt# 304	100	—
	TRANSCRIPTS		
	RADIOLOGY		
	CREMATION 1		
	WRITS		
	TOTAL	100	—

Received By

F-3141a

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